According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it deplays a valid OMB control number. The OMB control number for this information collection is ______.

Varning: It is a Federal crime to make materially false, fictitious, or fraudulent statements, entries, or representations knowingly and villfully on this form to secure disability accommodations provided under regulations of the United States Department of Transportation 18 U.S.C. § 1001).



U.S. Department of Transportation Service Animal Air Transportation Form

Ser	vice Animal Handler's Name:	Phone	e:
Service Animal User's Name (if different from Handler):		ller): Phor	ıe:
ser	vice Animal Handler's Email:	Animal's Name	
)es	scription of the Animal (including weight):		
١n	imal Health		
]	is vaccinated for rabies.	Date of last vaccination: Date vaccination exp	ires in the dog:
]	To my knowledge, [Insert Animal's Name]	does not have fleas or ticks or a disease that would end	anger people or other animals.
	Veterinarian's Name (signature not required):	Phone:	
١n	imal Training and Behavior		
]	has been trained to do work or perform tasks to assist me with my disability.		
	Name of Animal Trainer or Training Organiza	ation: Pho	one:
]	has been trained to behave in a public setting. [Insert Animal's Name]		
]	I understand that a properly trained dog remains under the control of its handler. I understand that a properly trained dog does not act aggressively by biting, barking, jumping, lunging, or injuring people or other animals. It also does not urinate or defecate on the aircraft or in the gate area.		
]	I understand that ifshows that it has not been properly trained to behave in public, then the airline may treat [Insert Animal's Name]		
	as a pet by charging a pet b	fee and requiringto be transported in [Insert Animal's Name]	an FAA-approved pet carrier.
]	[Insert Animal's N	has not behaved aggressively or caused serious Name] lain:	
)tl	ner Assurance		
	I understand that mu [Insert Animal's Name]	st be harnessed, leashed, or tethered at all times in the a	airport and on the aircraft.
	I understand that if causes damage, then the airline may charge me for the cost to repair it, as long as the airline [Insert Animal's Name] would also charge passengers without disabilities to repair the similar kinds of damage.		
	I am signing an official document of the U.S. Department of Transportation. My answers are true to the best of my knowledge. understand that if I knowingly make false statements on this document, I can be subject to fines and other penalties.		

Signature of the Service Animal Handler: _____ Date: _____